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NEWS NOTES

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GENERAL KIRK OUTLINES ADVANTAGES OF REGULAR ARMY CAREER FOR DOCTORS

Advantages offered in the Regular Army for the purpose of attracting doctors to maintain the Medical Department's high wartime standards were outlined by Major General Norman T. Kirk, Surgeon General of the Army, in a recent talk at convocation ceremonies for the 44th General Hospital and the 135th Medical Group at the University of Wisconsin.

"All general hospitals," General Kirk stated, "will be centers for certain types of cases, where medical officers will get exceptionally wide and varied experience in residency-type training. It is our policy to assign and train these medical officers so that they may obtain board certification by the American Specialty Boards.

"Also, looking to the future when some other emergency might arise, we are working on a program that will preserve and foster the kind of co-operation and assistance which your 44th General Hospital and 135th Medical Group gave us. We will look to the 'sponsored' medical units to provide the qualified, integrated personnel for the operation of certain types of military hospitals and other medical units. In time of an emergency, mobile and fixed hospitals must be completely integrated units, each with a harmonious staff of competent doctors so coordinated and organized as to function with the least possible delay. The civilian-sponsored medical units organized and staffed by our large medical institutions meet these requirements. They provide for early availability, early departure and immediate employment in an emergency."

General Kirk praised the "esprit de corps that is surpassed in but few organizations" and commended the 44th General Hospital and the 135th Medical Group for their record in World War II.

The 44th is well-known for its stand against an attack by Japanese troops on Leyte, when several doctors were injured. The Japanese dead numbered seventy-five.

MEDALS OF MERIT TO BE AWARDED TO DR. WEED, DR. BLAKE AND DR. RICHARDS

The Army's preventive medicine program, which the nation the healthiest Army in history, will receive recognition when Medals of Merit will be presented to three eminent scientists by Major General Norman T. Kirk, Surgeon General of the Army, at the monthly meeting of Medical Department officers.

Dr. Francis Gilman Blake, President of the Army Epidemiological Board; Dr. Alfred Newton Richards, Chairman of the Committee on Medical Research, Office of Scientific Research and Development; and Dr. Lewis H. Weed, Chairman of the Division of Medical Sciences, National Research Council, will receive the awards, which will be signed by President Truman.

Dr. Blake, Dean of the Yale University School of Medicine and Sterling Professor of Medicine, responded to the request of The Surgeon General in 1940 to assist in the planning and organization of what later became the Army Epidemiological Board. Upon its establishment by the Secretary of War in 1941, Dr. Blake became President of the Board and Consultant to the Secretary of War.

During the period from September to the end of December, Dr. Blake served as director of a special commission which The Surgeon General and the U.S.A. Typhus Commission sent to New Guinea to investigate scrub typhus fever. Entering the field with selected associates, under conditions of danger both from disease and the enemy, he was eminently successful in the accomplishment of his mission. In addition to the formulation of the basic principles of control measures against scrub typhus, practical directions for the protection of the troops were drawn up and a wealth of valuable material was acquired for use in investigations in this country. Since Dr. Blake's return, this country has become the main center of research on scrub typhus.

In commenting on Dr. Blake's work, General Kirk wrote: "Through his fidelity, adherence to ideals, integrity, and expert knowledge he has contributed incalculable strength to the efforts of The Surgeon General to maintain and preserve the health of the Army. It is deeply believed that few distinguished civilians in his sphere of activity have so well deserved gratitude and recognition for meritorious service to the nation."

Dr. Richards, Vice President in charge of medical affairs and Professor of Pharmacology at the University of Pennsylvania, was appointed Chairman of the Committee on Medical Research in July of 1941, and since that time has directed the committee's activities toward solving important medical problems embracing all phases of preventive and therapeutic medicine. Three of the outstanding contributions made to the nation include the development of blood plasma for the use of combating shock on the battlefield, the development of penicillin from a "laboratory curiosity to a life-saving agent", and the discovery and production of new insect repellents and insecticides, which have proved so successful in bringing under control the insect-borne diseases, such as malaria and typhus.

MEDALS OF MERIT TO BE AWARDED TO DR. WEEED, DR. FLAKE AND DR. RICHARDS (Cont.)

"Through his work in organizing eminent scientific workers into an effective research program, Dr. Richards rendered exceptionally meritorious service to the nation," General Kirk stated.

Dr. Weed, Director of the Johns Hopkins Medical School, and Professor of Anatomy at that school, has served as Chairman of the Division of Medical Sciences, National Research Council, since 1939. He has played an influential role in mobilizing the scientific resources of medicine to meet the emergency of war. Leading civilian scientists were appointed to committees formed to cover important aspects of military medicine. Acting upon questions referred to them by The Surgeons General of the Army and Navy, these committees made recommendations concerning policies and procedures in the prevention and cure of disease. Dr. Weed inaugurated this program of expansion, thus enabling the Division to render more effective service.

Other wartime activities performed by Dr. Weed include service on the now inactive Health and Medical Committee of the Council of National Defense, and as a member of the Committee on Medical Research, Office of Scientific Research and Development. He is currently serving as Chairman of the National Advisory Committee of the American Red Cross.

"By his vision and energetic action," General Kirk stated, "Dr. Weed has rendered exceptionally meritorious and invaluable service to his country."

NEW STREPTOMYCIN ALLOCATION PROGRAM TO MAKE PROVISION FOR CIVILIAN USES

The Army Medical Department, which has received many requests for supplies of streptomycin to be used in treating civilian cases, has announced today that all civilian inquiries and requests for this drug are to be sent to Dr. Chester S. Keefer, Evans Memorial Hospital, 65 East Newton, Boston, Massachusetts. Telephone Kenmore 9200.

Dr. Keefer is Chairman of the Committee on Chemotherapeutic and Other Agents of the Division of Medical Sciences, National Research Council, and has been authorized to handle civilian requests, providing they are submitted by a physician giving sufficient technical information to enable him to decide whether streptomycin is indicated in the treatment of the case.

Distribution of limited supplies of streptomycin to civilians through the Committee on Chemotherapeutic and Other Agents of the Division of Medical Sciences, National Research Council, has been provided for in the allocation program recently established by the Civilian Production Administration. Other agencies receiving allotments of the scarce drug include the Army, Navy, Veterans Administration, and the United States Public Health Service.

Although there has been a general misconception that the Army controls the total streptomycin supply, actually an approximate thirty per cent will

NEW STREPTOMYCIN ALLOCATION PROGRAM TO MAKE PROVISION FOR CIVILIANS (Cont.)

be allotted to the Army from the production for the month of March. The bulk of the limited supply received by the Army has been employed in treating urinary tract infections associated with spinal cord injuries, and a few serious infections which have proved resistant to penicillin. At no time has the allotment been adequate to permit any extensive research, such as experimental work on the treating of tuberculosis. In order that Dr. Keefer may obtain an adequate supply for civilian appeals, the Army has voluntarily agreed to a delay in its March delivery of streptomycin from producers.

Grants-in-aid of approximately \$500,000 for the clinical study of streptomycin, contributed in equal shares to the National Research Council by eleven pharmaceutical manufacturers, has already been announced by the Chemical Division of the Civilian Production Administration. The participating firms constitute the Streptomycin Producers Advisory Committee of the CPA.

Dr. Keefer, who headed the clinical investigation of penicillin, will be in charge of the similar program on streptomycin and will submit recommendations, together with a report on the results. The CPA has announced that there will be no commercial distribution of streptomycin at this time, nor will the producers supply the drug directly for civilian requests. Physicians have been asked not to submit requests for streptomycin if the cases are susceptible to the action of the sulfonamides, penicillin and other therapeutic agents.

The production of streptomycin, which was approximately 3,000 grams last September, is expected to increase to nearly 27,000 grams by March. A companion drug to penicillin, streptomycin is produced in a similar manner, by fermentation and chemical extraction, and, like penicillin, requires carefully controlled conditions of temperature, air and sterility. It is expected to prove a valuable supplement in cases where infections do not respond to penicillin treatment, but studies have not yet advanced to the point where the methods of administration or the amenable diseases are definitely known.

CIVILIAN CONSULTANTS PRAISE WORLD WAR II ACHIEVEMENTS IN NEUROPSYCHIATRY

The Army Medical Department was praised for its "outstanding contribution to the advancement of psychiatry in World War II" in a statement by Dr. Arthur H. Ruggles, Chairman of the Committee of Neuropsychiatric Civilian Consultants to the Secretary of War, Major General Norman T. Kirk, Surgeon General of the Army, has announced.

Dr. Ruggles, who is Medical Director of Butler Hospital, Providence, Rhode Island, attributed the "extremely low percentage of the major mental disorders" (psychoses) in World War II to the Army's "efficient and effective methods of early treatment of the less severe nervous disorders."

MORE

CIVILIAN CONSULTANTS PRAISE WORLD WAR II ACHIEVEMENTS IN NEUROPSYCHIATRY (Cont)

The statement was issued by Dr. Ruggles on behalf of the Civilian Consultants. The Committee, comprised of a group of the country's outstanding psychiatrists, was designated by the Secretary of War to aid in safeguarding the mental health of the nation's soldiers.

At their final meeting, held in the Neuropsychiatric Consultants Division, Office of The Surgeon General, recommendations were made concerning more formal training of the residency and graduate type for Medical Corps officers; approval was granted on a proposed consultant plan; and recommendations were made regarding the release to the public of the Army's neuropsychiatric treatment film "Let There Be Light", depending on further experimental work. The Consultants also endorsed the new neuropsychiatric nomenclature developed by the Army.

The significance of the neuropsychiatric problem in World War II is indicated by the fact that over forty per cent of the Army's medical discharges in World War II were for neuropsychiatric reasons. Out of every hundred men suffering combat-engendered emotional disturbances during the war, the Medical Department returned 40 to 50 to duty within two days, after care by divisional psychiatrists. Ten to fifteen returned to duty after two weeks' treatment in forward hospitals. Thirty men out of every hundred cases improved sufficiently to remain in the theater of operations in non-combat jobs, while some of the others were assigned to some form of Army work in this country.

"At all times, even with numerically insufficient personnel," Dr. Ruggles stated, "great progress has been made in the recognition and care of the neuropsychiatric patient. The Consultants feel that this has been due to the outstanding leadership of Brigadier General William C. Menninger, Chief of the Neuropsychiatry Consultants Division. General Menninger, a most able psychiatrist, is also an outstanding organizer, and has built up in his own office a distinguished group of young psychiatrists and neurologists who have made a very great contribution to the organization of psychiatry and neurology in classification centers, station and general hospitals, in the divisions in convalescent camps, and many other units scattered all over the world in this global warfare.

"Many of the technical medical bulletins prepared by the Division of Neuropsychiatry and distributed to the medical officers are outstanding in their clarity and scientific accuracy; and, again, many of these should be of the greatest use in civilian education of the various groups taking part in psychiatric study and treatment.

"We believe that the history of this Division will be an outstanding contribution to the advancement of psychiatry and indicate a very distinguished record achieved during World War II."

CIVILIAN CONSULTANTS PRAISE WORLD WAR II ACHIEVEMENTS IN NEUROPSYCHIATRY (Cont)

Other Consultants attending the meeting included: Dr. Frederick Parsons, Commissioner of Mental Hygiene, New York State; Dr. Edward Strecker, Professor of Psychiatry, University of Pennsylvania; Dr. Edwin Zabriskie, Professor of Neurology at the College of Physicians and Surgeons, Columbia University; and Dr. Allen Gregg, Medical Director of the Rockefeller Foundation.

LIEUTENANT COLONEL J. F. HAMMOND AWARDED LEGION OF MERIT

Lieutenant Colonel Johnson F. Hammond, MC, Editor of the Bulletin of the United States Army Medical Department, has been awarded the Legion of Merit for his work in developing "this journal into an invaluable means of relaying the latest authoritative medical developments to medical officers all over the world. His achievements signally contributed to the welfare of the sick and wounded in World War II."

Entering the Army Medical School, Washington, D. C., in 1911, Colonel Hammond was commissioned in the Regular Army Medical Corps upon his graduation in 1912. Following service in California, Philippine Islands, Texas, Illinois, and the District of Columbia, he was retired in 1920 for physical disabilities. Soon after his retirement he was returned to active duty in his former position as Director of the Sixth Corps Area Laboratory, Fort Sheridan, Illinois, where he served until June of the following year.

In 1922 he joined the staff of the Journal of the American Medical Association in Chicago, and remained there until he was recalled to active service in August of 1943. Since that time, he has been on duty in the Office of The Surgeon General as Editor of the Bulletin.

A native of Ohio, Colonel Hammond is a graduate of Rush Medical College and the University of Chicago.

BRIGADIER GENERAL EDWARD REYNOLDS NAMED HARVARD ADMINISTRATIVE VICE PRESIDENT

Brigadier General Edward Reynolds, former Chief of the Supply Service, Office of The Surgeon General, was named to the newly-created post of Administrative Vice President of Harvard University.

In 1942, General Reynolds resigned as President of the Columbia Gas and Electric Corporation, New York City, and became the civilian Chief of Supply Service for the Medical Department. He was commissioned the following year as a Colonel, and in 1945 was promoted to Brigadier General. Prior to leaving the Army in December of 1945, he was awarded the Distinguished Service Medal.

A native of Boston, Massachusetts, he is a graduate of Milton Academy and Harvard University. He will assume his duties at Harvard sometime this month.

MAJOR EMMA E. VOGEL AWARDED LEGION OF MERIT

Major Emma E. Vogel, Director of Medical Department Physical Therapists, Office of The Surgeon General, has been awarded the Legion of Merit for her work in effectively organizing "the Physical Therapists Branch, and formulating policies and plans to insure the highest standards of treatment for the sick and wounded."

During World War I, Major Vogel served in a civilian capacity in the field of physical therapy in several Army hospitals, and in 1922 assisted in the organization of the first Medical Department Training Course in Physical Therapy at Walter Reed General Hospital, Washington, D. C. She served as technical supervisor of this course until 1942.

Assigned as Superintendent of Physiotherapy Aides, Office of The Surgeon General, in August of 1942, Major Vogel held this position until December of the same year, when Public Law 828 was passed, authorizing military status for the group. Effective on the 12th of January, 1943, Major Vogel was appointed the first Director of Physical Therapists, and has served in that capacity up to the present time.

"Major Vogel's services," the citation stated, "were at all times characterized by outstanding accomplishment and unselfish devotion to duty."

MAJOR HELEN C. BURNS AWARDED LEGION OF MERIT

Major Helen C. Burns, Director of Medical Department Dietitians, Office of The Surgeon General, has been awarded the Legion of Merit for her work in the "organization and establishment of the Dietetic Branch and formulated procedures which resulted in outstanding professional achievements in the dietetic field."

Commissioned in the Army in 1943, Major Burns was appointed to her present position with the rank of Major. Her duties include the responsibility for the procurement and original assignment of Medical Department Dietitians, and acting as advisor to The Surgeon General on all matters pertaining to Medical Department Dietitians.

A native of Lowell, Massachusetts, Major Burns received her B. S. degree from Simmons College in Boston. In 1928 she entered the Army School for Dietitians at Walter Reed General Hospital, and remained on duty there after graduation. In 1933, she was appointed Chief Dietitian at Walter Reed General Hospital, and served in that position until August of 1942, when she was assigned to her present post.

MEDICAL AID MAN POSTHUMOUSLY AWARDED MEDAL OF HONOR

Private William D. McGee, Indianapolis, Indiana, a 76th Infantry Division medical aid man, who was fatally wounded while evacuating the

MEDICAL AID MAN POSTHUMOUSLY AWARDED MEDAL OF HONOR (Continued)

second of two casualties from a German mine field, has been posthumously awarded the Medal of Honor, the nation's highest military award.

Presentation of the award was made to his wife, Mrs. Ruth McGee, of Indianapolis.

Private McGee, who was inducted into the Army in December of 1942, was making a night crossing of the Moselle River with his company in an attempt to capture the town of Mulheim, Germany. The assault boats landed in an area heavily mined by the retreating Germans.

"Two men of the first wave," stated the citation, "attempting to work their way forward, detonated mines which wounded them seriously, leaving them bleeding and in great pain, beyond the reach of their comrades. Entirely on his own initiative, Private McGee entered the mine field, brought out one of the injured to comparative safety, and had returned to rescue the second victim, when he stepped on a mine and was severely wounded in the resulting explosion.

"Although suffering intensely and bleeding profusely, he shouted orders that none of his comrades was to risk his life by entering the death-sewn field to render the first aid that night might have saved his life.

"In making the supreme sacrifice, Private McGee demonstrated a concern for the well-being of his fellow soldiers that transcended all considerations for his own safety, and a gallantry in keeping with the highest traditions of the military service."

NEW ARMY REGULATION AUTHORIZES PROFESSIONAL GRADUATE TRAINING FOR MC OFFICERS

An important forward step in the establishment of professional graduate training for Army doctors has been taken with the enactment of the new Army Regulation 350-1010, which authorizes the establishment of an organized program of graduate education for "the elevation of the general level of professional qualifications of all Medical Corps officers."

Medical Corps officers selected for training in medical surgical specialties by The Surgeon General's Professional Training Committee will be assigned to a Medical Department installation approved by the Council on Medical Education and Hospitals and by the appropriate American specialty board for training in the particular specialty, according to the regulation. The minimum duration and scope covered by the training will be such as to meet the certification requirements of the specialty board concerned.

Upon approval of The Surgeon General, specialty training may be supplemented by service school instruction or a civilian teaching institution,

NEW ARMY REGULATION AUTHORIZES PROF. GRADUATE TRAINING FOR MC OFFICERS (Cont.)

but the time employed in such training may not exceed one-third of the total training period. Officers desiring supplemental training must submit an application to The Surgeon General indorsed by their commanding officer, and must include reasons for the recommendation of such training in that application.

Postgraduate training in medical and surgical subspecialties and preventive medicine will be offered at Medical Department service schools, installations, or at civilian teaching institutions. Application for these courses must also be indorsed by the commanding officer and submitted to The Surgeon General with a statement of the applicant's qualifications.

An education committee will be organized at each medical installation caring for sick and injured, which will be responsible for the organization, supervision and coordination of the medical educational program. The commander of the installation will serve as chairman of the committee, which is to be composed of qualified members of the professional staff and authorized civilian consultants. This committee is also responsible for the over-all organization and supervision of the program, and is to maintain such records as are necessary to indicate the progress of each medical officer entering the training. Assurance of a well-rounded training program and the establishment of a basis for the evaluation of each individual's professional development is also a part of the committee's duties.

Installations conducting approved graduate training in medical and surgical specialties will maintain a staff of qualified specialists. Teaching ability will be the major factor in selecting chiefs of services and sections at these installations, and the officers selected will be professionally acceptable to the American specialty boards concerned. Medical officers undergoing residency-type training are to keep diaries on medical cases worked up, investigative work, collateral reading, case presentations at clinical pathologic conferences, and studies in basic sciences. In addition to a periodic review of these diaries by the education committee, each applicant for an American specialty board will present his diary with his application. Continuous effort will be made to improve the teaching program. In selected large station hospitals, the development of the program will be toward approved internships, and residencies in medicine and general surgery. Affiliation with adjacent civilian medical facilities will be utilized wherever possible.

As a guide in the conduction of the program, the requirements necessary for certification by American specialty boards and the principles set forth in "Essentials of Approved Residencies and Fellowships" and "Essentials of an Approved Internship" will be followed. These pamphlets were prepared and published by the Council on Medical Education and Hospitals of the American Medical Association.

NEW ARMY REGULATION AUTHORIZES PROF. GRADUATE TRAINING FOR MC OFFICERS (Cont.)

Each quarterly period, a report on each medical officer will be submitted by chiefs of services through channels to The Surgeon General. These reports, in addition to indicating the proficiency of the officer, will include any pertinent remarks concerning his progress and special training problems.

"THE WELCH STORY" ON EXHIBIT IN HOSPITAL AND DOMESTIC OPERATIONS DIVISION

"The Welch Story", a pictorial history of the establishment and operation of Welch Convalescent Hospital, Daytona Beach, Florida, is on exhibit in Hospital and Domestic Operations Division, Office of The Surgeon General, in Room 2E528, the Pentagon.

Measuring about two by two and a half feet, bound in dark leather and hammered metal, the brochure is illustrated with eight by ten glossy prints, and features an accompanying narrative.

The idea of such an illustrated record was first conceived by members of the Hospital and Domestic Operations Division, who found that neither the Library of Congress nor the National Archives has any comprehensive material on convalescent hospitals of past wars. Through their efforts, in collaboration with the patients and the hospital staff of Welch Convalescent Hospital, "The Welch Story" was written, illustrated and bound.

In addition to the copy on display here, one will be placed in the Library of Congress as a permanent record and another will be furnished the Brooke Army Medical Center, Fort Sam Houston, Texas, for use as an instructional aid.

COMMISSION APPOINTED TO STUDY PROSTHETIC PROGRESS IN EUROPE

A commission on prosthetic devices, comprised of five Army and civilian experts, is enroute to Europe to make a study of techniques in amputation surgery, developments in the field of prosthetics and artificial limbs, and the rehabilitation and reconditioning of amputees.

The commission, which is making the trip at the direction of the Secretary of War, plans to visit scientific centers in England, France, Switzerland, Germany, Sweden, and possibly Russia.

Colonel Leonard T. Peterson, Chief of the Orthopedics Branch, Surgeon General's Office, will head the unit. Other members include Dr. Paul E. Klopsteg, Director of Research at the Northwestern University Technological Institute and Chairman of the Committee on Prosthetics, National Research Council; Lt. Colonel Robert G. F. Lewis, Ordnance Department of New York City, engineer assigned to The Surgeon General's Office; Lt. Colonel Rufus H. Alldredge, MC, Chief of the Amputation Section, England General Hospital, Atlantic City, New Jersey; and Mr. Edmond M. Wagner, consulting engineer,

COMMISSION APPOINTED TO STUDY PROSTHETIC PROGRESS IN EUROPE (Continued)

former Chief of the Engineer Section, Office of Scientific Research and Development. Technician Third Grade John P. Gavell will accompany the commission as recorder.

For some time, members of the commission have been making preliminary investigations of the latest techniques in amputation surgery and developments in prosthetic devices, particularly those developed by German scientists. Studies were based on the observations of Army medical personnel returned from theaters of operations, information made available by European scientists in this country, and intensive research in library reference material.

Cineplastic surgery, one of the types of surgery to be investigated, involves connection of the activating cords of the artificial limb to the muscles by means of pins made of inert or non-irritating material. The pin is inserted through the skin-lined tunnel in the muscle. Although this treatment has been used to some extent in treatment of amputees, the commission hopes to find means of improvement to increase the utility of the artificial limb. Research is now being conducted which suggests that cineplastic surgery may be extensively applied in prostheses in the near future.

UNIVERSITY OF COLORADO TO OFFER BASIC SCIENCE COURSES FOR FITZSIMONS TRAINEES

The University of Colorado Medical School has made arrangements to offer basic science courses and lectures in bacteriology, bio-chemistry, physiology, anatomy, and pathology to Regular Army Medical Corps officers training at Fitzsimons General Hospital in Denver, according to an announcement by Colonel Floyd L. Wergeland, Director of the Training Division, Office of The Surgeon General.

Arrangements were made at a conference between Training Division representatives and the Assistant Dean of the University of Colorado, Robert S. Liggett. Lt. Colonel C. Z. Berry, Chief of the School Branch, Colonel John Gray, Chief of Surgical Service, Fitzsimons General Hospital, and a member of the Fitzsimons Educational Committee, and Captain Elmer Rigby, MC, accompanied Colonel Wergeland.

Both groups concerned, including the faculty, students, and the members of the Training Division, are enthusiastic about the mutual utilization of civilian and Army medical facilities, and expressed the belief that the program will prove very successful.

In addition to the use of facilities at the University Medical School by Medical Corps officers, the wards at Fitzsimons General Hospital will be open to observation by University medical students, and will provide excellent teaching material, Colonel Wergeland said.

ASTP PROGRAM TO BE TERMINATED BY FIRST OF JUNE

The medical Army Specialized Training Program will be terminated by the first of June this year, according to ASF Circular 56, which is dated 6 March 1946.

Enlisted men assigned to ASTP for medical training will be disposed of as follows:

"Enlisted men assigned to ASTP for medical training who are scheduled to graduate from medical school before 1 July 1946 will not be separated from the Army regardless of age, length of service, critical score, or by virtue of having three or more children under eighteen years of age. They will not be permitted to enlist in the Regular Army. They may be separated under existing regulations pertaining to discharge of enlisted men because of undue hardship or because of importance to National health, safety, or interest. They will not be separated for any other reason except as individually authorized by the War Department"

The Circular makes the following provisions for enlisted men assigned to ASTP for medical training who are not scheduled to graduate from medical school prior to 1 July 1946:

"Those enlisted men who meet current War Department criteria for separation may be discharged. Those enlisted men who are eligible for discharge under 30 April or 30 June criteria and who do not plan to continue their medical studies may be reassigned within the service command until the date of their discharge if their services are needed. If their services are not needed, they will be discharged.

"Those enlisted men who do not meet War Department criteria for separation, who do not plan to continue their medical studies, or are not acceptable at an accredited medical school will be transferred to Brooke Army Medical Center, Fort Sam Houston, Texas.

"Those enlisted men who are not eligible for separation, who signify their intention to continue their medical studies, and are acceptable at an accredited medical school will be released from active Federal Service and transferred to the Enlisted Reserve Corps. Authority for such release will be Section I, AR 615-363, and this circular. These men will furnish a certificate from the dean or other similar official of a medical school approved by the Council of Medical Education and Hospitals of the American Medical Association."

Provision is made by the circular that these men must sign a statement requesting transfer to the Enlisted Reserve Corps and agreeing to certain conditions pertaining to termination of enrollment or requests for transfers between medical institutions.

FIRST ARMY REGULATION ON INDUSTRIAL MEDICINE ESTABLISHED BY WAR DEPARTMENT

General policies for maintaining an industrial medical program in Army-owned industrial plants, arsenals, depots, and ports of embarkation are outlined in Army Regulation 40-220, 16 October 1945, which establishes as a permanent part of Government activities a program that has been functioning for over three years.

Under AR 40-220, The Surgeon General initiates policies and prepares directives and technical advice for all Army branches on matters pertaining to industrial health hazards and practices. Provision is also made for inspections, reports, and the maintaining of such records as are necessary to insure the effectiveness of the program.

An industrial hygiene laboratory will be maintained at Edgewood Arsenal, Maryland, for conducting surveys and special investigations with respect to the control of occupational health hazards and the improvement of working conditions from a health standpoint.

Activities of the laboratory include the chemical and toxicological analysis of toxic substance samples encountered during surveys and investigations, the recommending, including plans and specifications, of equipment to control health hazards, and the investigation of research problems encountered in the field of industrial hygiene.

The Army Industrial Hygiene Laboratory, in collaboration with the Training Division of The Surgeon General's Office, is preparing an exhibit to be displayed at the meetings of the American Association of Industrial Physicians and Surgeons, the National Conference of Governmental Industrial Hygienists, the American Industrial Hygiene Association, and other allied professional societies. It will take place at the Hotel Sherman, Chicago, from the 8th to the 13th of April.

PROMOTIONS, OFFICE OF THE SURGEON GENERAL

Captain to Major

IVAN C. DIMICK, JR., MC, Benson, Minnesota, Professional Administrative Service, Physical Standards Division, Disposition and Retirement Branch.

JAMES R. FRANCIS, MAC, Detroit, Michigan, Operations Service, Mobilization and Overseas Operations Division, Theater and Troop Units Branch.

ARRIVALS, OFFICE OF THE SURGEON GENERAL

COLONEL GEORGE L. CALDWELL, VC, Hesperia, Michigan, formerly Headquarters, 3d Service Command, Baltimore, Maryland, assigned to Veterinary Division.

ARRIVALS, OFFICE OF THE SURGEON GENERAL(Continued)

COLONEL ALFRED A. DELORIMIER, MC, San Francisco, California, formerly overseas, Headquarters, 4th Replacement Depot, Japan, assigned to Personnel Service, Office of the Chief.

COLONEL WILLIAM B. FOSTER, MC, Arlington, Virginia, formerly SW Personnel Board, OSW, Washington, D. C., assigned to Historical Division.

COLONEL THOMAS L. SMITH, DC, Red Level, Alabama, formerly overseas, Headquarters, United States Forces, European Theater, assigned to Dental Division.

LIEUTENANT COLONEL CARL T. DUBUY, MC, Tulia, Texas, formerly MDRP, Tilton General Hospital, Fort Dix, New Jersey, assigned to Operations Service, Mobilization and Overseas Operations Division, Organization and Equipment Allowance Branch.

LIEUTENANT COLONEL GEORGE F. JEFFCOTT, DC, Aberdeen, Maryland, formerly overseas, Headquarters, United States Forces, European Theater, assigned to Personnel Service, Office of Chief.

LIEUTENANT COLONEL CARROLL YRICHBAUM, MC, Montclair, New Jersey, formerly Separation Center, Fort Dix, New Jersey, assigned to Personnel Service, Office of Chief.

LIEUTENANT COLONEL THOMAS R. WRIGHT, MC, Temple, Texas, formerly MDRP, Tilton General Hospital, Fort Dix, New Jersey, assigned to Professional Administrative Service, Physical Standards Division, Disposition and Retirement Branch.

MAJOR BERNARD LABEL, MAC, Onalaska, Wisconsin, formerly MDRP, Tilton General Hospital, Fort Dix, New Jersey, assigned to Personnel Service, Military Personnel Division, Classification and Records Branch.

MAJOR JOHN W. HAVERTY, MAC, Cincinnati, Ohio, formerly overseas, Headquarters, Army Forces, West Pacific, assigned to Historical Division.

MAJOR ROBERT RYER, III, SnC, San Antonio, Texas, formerly overseas, Headquarters, United States Forces, China Theater, assigned to Preventive Medicine Service, Civil Public Health and Nutrition Division.

MAJOR MAURICE E. WASHBURN, DC, Calfax, Wisconsin, formerly Camp Butler, North Carolina, assigned to Personnel Service, Military Personnel Division, Procurement, Separation and Reserve Branch.

1ST LIEUTENANT HARRY V. HERNDON, MC, New Orleans, Louisiana, formerly Separation Center, Indianatown Gap Military Reservation, Pennsylvania, assigned to Professional Administrative Service, Professional Inquiries Unit.

2D LIEUTENANT FRANK C. MARSHALL, MAC, Queens, New York, formerly MDRP, Tilton General Hospital, Fort Dix, New Jersey, assigned to Personnel Service, Military Personnel Division, Classification and Records Branch.

DEPARTURES, OFFICE OF THE SURGEON GENERAL

COLONEL CLIFFORD A. BEST, MC, Lincoln, Nebraska, formerly Personnel Service, assigned to Fitzsimons General Hospital, Denver, Colorado.

COLONEL NORTON CANFIELD, MC, New Haven, Connecticut, formerly Surgical Consultants Division, Otolaryngology Branch, assigned to Separation Center, Fort Devens, Massachusetts.

DEPARTURES, OFFICE OF THE SURGEON GENERAL (Continued)

COLONEL WORTH B. DANIELS, MC, Washington, D. C., formerly Medical Consultants Division, assigned to Walter Reed General Hospital, Army Medical Center, Washington, D. C.

COLONEL ALBAN F. GAALIAS, MC, Green Gables, Pasadena, Maryland, formerly Professional Administrative Service, Physical Standards Division, Disposition and Retirement Branch.

COLONEL CORNELIUS E. GORMAN, MC, Lynchburg, Virginia, formerly Professional Administrative Service, Physical Standards Division, assigned to Camp Shelby, Mississippi.

COLONEL JOHN W. RICH, MC, Alhambra, California, formerly Personnel Service, assigned to Letterman General Hospital, San Francisco, California.

COLONEL JAMES S. TAYLOR, MC, Denver, Colorado, formerly Personnel Service, assigned to MDRP, Fitzsimons General Hospital, Denver, Colorado.

COLONEL WILLIAM L. THOMPSON, MC, Washington, D. C., formerly Personnel Service, assigned to MDRP, Tilton General Hospital, Fort Dix, New Jersey.

LIEUTENANT COLONEL EDNA B. GROFFE, ANC, Washington, D. C., formerly Personnel Service, Military Personnel Division, Army Nurse Branch, assigned to Separation Center, Fort Dix, New Jersey.

LIEUTENANT COLONEL OSCAR P. HAMPTON, JR., MC, St. Louis, Missouri, formerly Surgical Consultants Division, Orthopedics Branch, assigned to Separation Center, Jefferson Barracks, Missouri.

LIEUTENANT COLONEL THOMAS H. STERNBERG, MC, Peoria, Illinois, formerly Preventive Medicine Service, Infectious Disease Control Division, assigned to Separation Center, Fort MacArthur, California.

LIEUTENANT COLONEL WILLIAM C. WHITE, MC, Scottsville, Virginia, formerly Operations Service, Mobilization and Overseas Operations Division, Organization and Equipment Allowance Branch, assigned to Detachment of Patients, Walter Reed General Hospital, Washington, D. C.

MAJOR JOHN M. GRACIE, II, MAC, Little Rock, Arkansas, formerly Operations Service, Training Division, assigned to Separation Center, Camp Chaffee, Arkansas.

MAJOR OLIVER J. IRISH, SnC, Washington, D. C., formerly Historical Division, assigned to Separation Center, Jefferson Barracks, Missouri.

MAJOR TERRY S. OZIER, VC, College Station, Texas, formerly Veterinary Division, Meat and Dairy Hygiene Branch, assigned to Separation Center, Camp Fannin, Texas.

MAJOR CHARLES E. G. REEVES, MAC, Summit, New Jersey, formerly Supply Service, Liaison Branch, assigned to Separation Center, Fort Dix, New Jersey.

MAJOR FRANK M. TAYLOR, JR., DC, Ontario, California, formerly Personnel Service, Military Personnel Division, Procurement, Separation and Reserve Branch, assigned to Separation Center, Fort Meade, Maryland.

MAJOR WILLIAM L. VOGT, MC, Gainesville, Florida, formerly Personnel Service, assigned to MDRP, Letterman General Hospital, San Francisco, California.

CAPTAIN GEORGE H. CLEARY, MC, Medford, Massachusetts, formerly Professional Administrative Service, Physical Standards Division, Disposition and Retirement Branch, assigned to Separation Center, Fort Devens, Massachusetts.

DEPARTURES, OFFICE OF THE SURGEON GENERAL (Continued)

CAPTAIN ELEANOR N. ECKLES, MAC, Bryn Mawr, Pennsylvania, formerly Army Medical Research and Development Board, Research Division, assigned to United States Forces, European Theater.

CAPTAIN NATHAN Z. GROVER, MC, Roxbury, Massachusetts, formerly Professional Administrative Service, Physical Standards Division, Disposition and Retirement Branch, assigned to MDRP, Lovell General Hospital, Fort Devens, Massachusetts.

CAPTAIN WILLIAM E. FORD, MC, Emlenton, Pennsylvania, formerly Professional Administrative Service, Physical Standards Division, Disposition and Retirement Branch, assigned to Separation Center, Indiantown Gap, Pennsylvania.

CAPTAIN HERBERT E. FLARMAN, MAC, New York, New York, formerly Operations Service, Resources Analysis Division, assigned to Separation Center, Fort Dix, New Jersey.

CAPTAIN CHARLES P. LAMONS, MAC, Coffeyville, Kansas, formerly Fiscal Division, Accounts and Audits Branch, assigned to Separation Center, Jefferson Barracks, Missouri.

CAPTAIN WALTER S. NEUSTADTER, MAC, New York, New York, formerly Executive Office, Hospital Fund Branch, assigned to Separation Center, Fort Dix, New Jersey.

CAPTAIN LAWRENCE I. O'KELLY, MAC, Boulder, Colorado, formerly Neuropsychiatry Consultants Division, Clinical Psychologists Branch, assigned to Separation Center, Fort Logan, Colorado.

CAPTAIN GEORGE I. SHETELKER, MAC, Stoughton, Wisconsin, formerly Office Service Division, Mail and Records Branch, assigned to Separation Center, Camp McCoy, Wisconsin.

CAPTAIN MILTON TURNER, AC, Cleveland, Ohio, formerly Technical Information Division, assigned to Separation Center, Camp Atterbury, Indiana.

CAPTAIN JAMES B. TRYMAN, MC, Charlottesville, Virginia, formerly Personnel Service, Military Personnel Division, Classification and Records Branch, assigned to Ashford General Hospital, White Sulphur Springs, West Virginia.

CAPTAIN JOHN H. WARING, MC, Boyertown, Pennsylvania, formerly Professional Administrative Service, Physical Standards Division, Disposition and Retirement Branch, assigned to Separation Center, Indiantown Gap, Pennsylvania.

1ST LIEUTENANT LEWIS W. SHELTON, TC, Alameda, California, formerly Office Service Division, General Service Branch, assigned to Separation Center, Fort MacArthur, California.

1ST LIEUTENANT BERT R. SHEPARD, AC, Clinton, Indiana, formerly Technical Information Division, assigned to Separation Center, Camp Atterbury, Indiana.

Address communications pertaining to any items appearing in NEWS NOTES to: Miss C. F. Irwin, Managing Editor; Technical Information Division, SGO, Tel: RE 6700, ext: 73877, 2D-549, The Pentagon, Washington 254 D. C.